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1/2 S/N	
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PATENT APPLICATION FEE D	ETERMINATION RECORD
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Effective January 1, 2003

Application or Docket Number

19/9/3979

CLAIMS AS FILED - PART I					 ,	24441 5						
OLAINIO A			(Column		(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTIT		
TOTAL CLAIMS			20				Ī	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	#395-	OR	BASIC FEE	\$790
тс	TAL CHARGEA	BLE CLAIMS	JO minus 20=		*			X\$25≡		OR	X\$ 57 =	
INE	EPENDENT CL	AIMS	3 minus 3 =		*			¥ø⊅		OR	×200=	
ML	ILTIPLE DEPEN	IDENT CLAIM P	PRESENT									
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	ļ	+/86-		OR	+360=	
								TOTAL	ļ,	OR	TOTAL	Tiloh
	C	(Column 1)	MIENDEL	MENDED - PART II (Column 2) (Column 3)			SMALL ENTITY			OR	OTHER THAN OR SMALL ENTITY	
4		CLAIMS		HIGH NUM		5555517	lſ		ADDI-			ADDI-
AMENDMENT A	e The	REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**	·. • · · · · · · · · · · · · · · · · · ·	=		X\$ \$ =		OR	5° X\$ % =	
MEN	Independent	*	Minus	***		=		760 X 42 =		OR	240 X840	
	FIRST PRESE	PRESENTATION OF MULTIPLE DEPENDENT CLAIM						180			360 +280	
							l	+ 140= TOTAL		OR	TOTAL	
							. /	ADDIT. FEE		OR	ADDIT. FEE	
	-elektrik genes in teerkin oo	(Column 1)	in an install the state of the	(Colur	والمراجع المراجع	(Column 3)	1 12		· '			-
m		CLAIMS REMAINING		HIGH NUM		PRESENT			ADDI-			ADDI-
Ł		AFTER AMENDMENT :		PREVIO PAID		EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
AMENDMENT	Total		Minus					کځ ×\$ ا∮≣		OR	X\$18€	· · · · · · · · · · · · · · · · · · ·
ME	Independent	*	Minus	***				120		OR	200 X 84 =	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM			180	**************************************		2CN	
								+ 140 =		OR	360 1880	
								TOTAL VDDIT. FEE		OR	T©TAL ADDIT: FEE	
		(Column 1)		(Colur		(Column 3)				:		
ပ		CLAIMS REMAINING		HIGH NUM		PRESENT	Γ		ADDI-			ADDI-
F		AFTER AMENDMENT		PREVIO PAID	DUSLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		25 X\$ \% =		OR	<i>5</i> 0 X \$18−	
	Independent	*	Minus	* *	··· · · · · · · · · · · · · · · · · ·	=]	X100 X42=			200 X 0 4=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]	180		OR	360		
								+ 140 =		OR	+ 280 =	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE												
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												